

"PAYMENT OF TRAVEL EXPENSES TO ATTEND MEETING"

FORM CD 210LF
(REV. 2-96)
DAO 203-9

U.S. DEPARTMENT OF COMMERCE

PRIMARY OPERATING UNIT
ITA/TD/SIF

SERIAL NO.

DATE RECORD PREPARED 11/04/99

RECORD OF GIFT OR BEQUEST

AMOUNT (Currency or check) VALUE
\$460.00

Offer has been made as described below of a gift or bequest for the purpose of aiding or facilitating the work of the Department. I certify that within the provisions of P.L. 88-611, and the terms of the gift, acceptance is recommended and is in accordance with policies stated in Department Administrative Order 203-9.

1. NAME AND ADDRESS OF DONOR
Mr. James Smith, CEO
IT Consulting
2122 Connecticut Avenue, NW
Washington, DC 20335

2. NAME AND TITLE OF EMPLOYEE TO WHOM OFFER IS MADE
Jane House
International Trade Specialist

3. DESCRIPTION OF PROPERTY AND/OR SERVICES IN KIND (if other than currency or cash)

'In-Kind'

Airline Ticket	\$270.00
Lodging	\$142.00
Meals	\$38.00
Taxi	
Other/Misc.	
TOTAL	\$450.00

"To Be Billed"

Taxi	\$10.00
Airline Ticket	
Meals	
Lodging	
Other/Misc.	
TOTAL	\$10.00

Dates of Travel: 11/6 - 11/9/99

Place of Travel: New York, NY

Based on attached letter of commitment dated: 4/30/99

Sponsor: Same as Donor

Appropriation Code: 001/xxxxxx/xxxx

Traveler will not receive any cash contribution/donation.

4. PURPOSE FOR WHICH GIFT OR BEQUEST IS OFFERED

To attend and participate in Info Tech Conference on "Doing Business inthe US".

5. PRIMARY OPERATING UNIT ☐ APPROVAL ☐ DISAPPROVAL

SIGNATURE

DATE

If approval of Office of the Secretary is required (See Section 8 & 9 DAO 203-09) submit to Chief Financial Officer and Assistant Secretary for Administration.

COMMENTS

6. OFFICE OF THE SECRETARY ☐ APPROVAL ☐ DISAPPROVAL

SIGNATURE

DATE

COMMENTS

ACCEPTANCE OF PAYMENT FROM A NON-FEDERAL SOURCE FOR TRAVEL EXPENSES

(INFORMATION SUBMITTED IN COMPLIANCE WITH 41 CFR PART 304-1)

☒ FOR PERIOD BEGINNING OCTOBER 1, 1998 AND ENDING MARCH 31, 1999
☐ FOR PERIOD BEGINNING APRIL 1, AND ENDING SEPTEMBER 30,

INSTRUCTION: For travel payments waived or paid by non-Federal sources in the case of conference, training or similar fees, report the amount charged to other participants. In the case of transportation or lodging, report the cost to the non-Federal source, or indicate the rate that would have been charged a similar non-Federal source for a similar benefit at the time the benefit was provided. In the case of meals or other benefits that are not provided incident to transportation, lodging, or a conference, training, or similar fee, report the cost to the non-Federal source or provide a reasonable approximation of the market value of the benefit. In the case of transportation on a chartered, corporate, or other private (i.e., non-commercial) aircraft, report the first-class rate that would have been charged by an air common carrier at the time the transportation was provided or if common carrier transportation was unavailable between the two locations, report the cost of chartering a similar aircraft using a commercially available service. In the case of lodging for which no commercial rate is available, report the maximum lodging rate prescribed by applicable government regulations.

1. U.S. DEPARTMENT OF COMMERCE, BUREAU: **International Trade Administration**

2. EVENT: *(identify event for which payment was accepted)*

Infito Tech Conference

3. SPONSOR(S) OF EVENT:

Same as Donor

4. LOCATION OF EVENT:

Orlando, FL

5. DATES OF EVENT:

From: 12/14/98

To: 12/16/98

6. NATURE AND BRIEF DESCRIPTION OF EVENT:

to participant at conference

7. EMPLOYEE:

Name: Janet Smith

Government Position: Trade Specialist

Travel Dates From: 12/14/98

To: 12/16/98

8. ACCOMPANYING SPOUSE *(if applicable)*

Name: N/A

Travel Dates From:

To:

9. NON-FEDERAL SOURCE(S) OF PAYMENT: (regardless of whether the source of payment is the event sponsor)

10. NATURE OF PAYMENTS : *(itemize the required information for **each** benefit accepted; attached additional sheet if necessary)*

(a) Nature of Benefit: *(e.g., round-trip commercial air transportation between Washington DC and Chicago; lodging)*
round trip ticket in-kind; lodging in-kind; meals in-kind; taxi-check

(b) Method of Payment: *(e.g. air transportation-in-kind; lodging-check; meals-check)*
round trip ticket in-kind; lodging in-kind; meals in-kind; taxi-check

(c) Individual (s) for Whom Provided: *(e.g., air transportation-employee; lodging-employee and spouse)*
round trip ticket employee; lodging employee; meal employee; taxi employee

(d) Non-Federal Source(s): *(regardless of whether the source of payment is the event sponsor)*
Ooffice Automation, 212 Conn., Ave., NW, Wash., DC 20335

(e) Amount of Payment: *(e.g., air transportation-\$480; lodging-\$160; meals-\$60)*
round trip ticket-\$270; lodging-\$64; meal-\$26; taxi-10

11. TOTAL AMOUNT OF PAYMENTS: *(for this employee and/or accompanying spouse in connection with this event)*

Total of Payments to Agency by Check: Total of Payments Provided in Kind: \$360.00